

# **Education Related Deferment Request**

OMB No. 1840-0700 Form Approved Exp. Date 02/28/98

William D. Ford Federal Direct Loan Program
Federal Direct Stafford/Ford Loans, Federal Direct Unsubsidized Stafford/Ford
Loans, Federal Direct PLUS Loans, Federal Direct Consolidation Loans

DO NOT USE THIS FORM if all your Federal Family Education Loan Program loans were made ON or AFTER July 1, 1993. WARNING: Any person who knowingly makes a false statement or misrepresentation on this form shall be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20, U.S.C. 1097.

EDU

Internship/Residency, Targeted Teacher, and PLUS Borrower with Dependent Student

Borrower's Information Please print legibly using blue or black ink.				
Last Name	First Name	Middle Initial	Social Security Number	
Street Address			Home Area Code/Telephone Number	
City	State	Zip Code		
Section 1: Deferment Request  Must be completed by borrower. See definitions and eligibility criteria on the back of this form.  I meet the qualifications stated on the back of this form for the Education Related Deferment checked below and request that the U.S. Department of Education (ED) defer repayment on my loan(s)				
beginning (MM-DD-YY)				
Check one:  While I am engaged in an INTERNSHIP/RESIDENCY program. Maximum eligibility is two years. (Dental Interns/Residents are encouraged to apply for an In-School Deferment.) Check appropriate institution: Institution of Higher Education, Hospital, or Health Care Facility Any other Institution or Organization While I am teaching in a designated TEACHER SHORTAGE AREA. Maximum eligibility is three years. Must re-apply each school year. Federal Direct PLUS Loan (Direct PLUS Loan) borrowers are not eligible.  While the STUDENT (named below) FOR WHOM I BORROWED A PLUS LOAN IS DEPENDENT and is enrolled at least half-time and has received a William D. Ford Federal Direct Loan (Direct Loan) Program or Federal Family Education Loan (FFEL) Program loan for that period of enrollment or is engaged full-time in one of the two programs listed below. Complete the following information (please print or type):				
Student's Name:		Student's SSN:		
My dependent student is:  — enrolled at least half-time and has received a Direct Loan Program or FFEL Program loan for that period of enrollment — engaged full-time in a Graduate Fellowship program  — engaged full-time in a Rehabilitation Training program				
Borrower Understandings and Certifications I understand that: (1) My deferment will begin on the date the deferment condition began but no more than six months before the date ED receives this request; (2) ED will not grant this deferment request unless all applicable sections of this form are completed and any additional required documentation is provided; (3) Principal payments will be deferred, but if my loan(s) is not subsidized by the federal government, I am responsible for paying the interest that accrues; (4) If I do not choose to pay all interest that accrues during my deferment period, ED will capitalize (see Definitions) such interest to the extent permitted by law. This will increase the principal balance of my loan(s); (5) If my deferment does not cover all my past due payments, ED may grant me a forbearance for all payments due before the begin date of my deferment; (6) If I have used all 24 months allowed for an Internship/Residency deferment, I can apply for a forbearance. I will be granted a forbearance for up to 12 months at a time for the remainder of my internship/residency program.				
I certify that: (1) The information provided in Section 1 above is true and correct; (2) I will provide additional documentation, as required, to ED to support my continued deferment status; (3) I will notify ED immediately when the condition(s) that qualified me for the deferment ends; and (4) I have read, understand, and meet the terms and conditions of the deferment for which I have applied as explained on the back of this form.				
(5) I certify that at the time I obtained my Direct Loan Program loan I had an outstanding balance on an FFEL Program loan (formerly known as a GSL) which was made prior to July 1, 1993.				
Signature of Borrower		Date _		
Section 2: Authorized Official's Cer	tification	See	e the back of this form for a list of Authorized Officials. Please print or type.	
I certify, to the best of my knowledge and belief, that the borrower or dependent, if applicable, named above is/was a student or engaged in the program/teaching service indicated in Section 1 and that the borrower and the borrower's program/teaching service meet all the eligibility requirements specified on the back of this form.  The borrower's program/teaching service began (MM-DD-YY) and is expected to end (ended) (MM-DD-YY)				
Teacher Shortage Area Deferment Only				
The borrower is teaching (taught) in for the school year				
which began (MM-DD-YY) and ends/ended (MM-DD-YY)				
Name of Institution				
		Institution's ID Nu	mber	
City, State, Zip Code Telephone		Telephone (	)	
		Date		
Name/Title of Authorized Official				

# Section 3: Definitions/Eligibility Criteria for Education Related Deferment Request

#### **Definitions**

- A deferment is a period during which I am entitled to postpone repayment of the principal balance of my loan(s). Interest does not accrue during an eligible deferment on Federal Direct Stafford/Ford Loans (Direct Subsidized Loans) or Federal Direct Subsidized Consolidation Loans (Direct Subsidized Consolidation Loans). I am responsible for the interest that accrues during this period on all other Direct Loan Program loans.
- Capitalization is a process whereby ED adds unpaid interest to the principal balance of a loan(s).

# **Eligibility Criteria**

To qualify for this deferment, at the time my Direct Loan Program loan was made, I must have had an outstanding balance on an FFEL Program loan (formerly known as a GSL) which was made prior to July 1, 1993.

I may defer (postpone) repayment of my loan(s) while:

- I am engaged in an INTERNSHIP/RESIDENCY program. Maximum eligibility is two years.
  - In an Institution of Higher Education, Hospital or Health Care Facility To qualify:
    - (1) My internship/residency program must: (a) be a supervised training program, (b) lead to a degree or certificate, and (c) require that I hold at least a Bachelor's Degree before acceptance into the program.
    - (2) I must be accepted into the internship/residency program.
  - In any other Institution or Organization. To qualify:
    - (1) My internship/residency program must: (a) be a supervised training program, (b) be required before I may be certified for professional practice or service, and (c) require that I hold at least a Bachelor's Degree before acceptance into the program.
    - (2) I must: (a) be accepted into the internship/residency program; and (b) provide ED with a separate statement from my state licensing agency which certifies my internship/residency, or portion thereof, is required before I may be certified for professional practice or service.
- I am teaching in a designated TEACHER SHORTAGE AREA. Maximum eligibility is three years. Must re-apply each school year. Direct PLUS Loan borrowers are not eligible.
  - To qualify, I must teach full-time in a public or nonprofit private elementary or secondary school in a geographic region, grade level, academic, instructional, subject matter, or discipline classified shortage area as defined by ED. (I will contact my Chief School Administrator or Chief State School Officer for a list of my state's shortage areas.)
- The dependent student for whom I borrowed a Direct PLUS Loan is enrolled at least HALF-TIME and has received a Direct Loan Program or FFEL Program loan for that period of enrollment.

- The dependent student for whom I borrowed a Direct PLUS Loan is engaged in a full-time course of study in a **GRADUATE FELLOWSHIP** program. To qualify:
  - (1) The graduate fellowship program must: (a) provide sufficient financial support to allow for full-time study for a period of at least six months, (b) require, before the awarding of financial support, a written statement from each applicant which explains the applicant's objectives, (c) require a graduate fellow to submit periodic reports, projects, or other evidence of the graduate fellow's progress, and (d) in the case of a course of study at a foreign university, accept the course of study for completion of the fellowship program.
  - (2) The dependent student for whom I borrowed the Direct PLUS Loan must: (a) hold at least a Bachelor's Degree conferred by an institution of higher education, and (b) have been accepted or recommended by an institution of higher education for acceptance into the graduate fellowship program on a full-time basis.
- The dependent student for whom I borrowed a Direct PLUS Loan is engaged in a full-time **REHABILITATION TRAINING** program. To qualify:
  - (1) The training program must: (a) be licensed, approved, certified, or recognized as providing rehabilitation training to disabled individuals by the Department of Veterans Affairs or a state agency responsible for vocational rehabilitation, drug abuse treatment, mental health services or alcohol abuse treatment programs, (b) provide services under a written, individualized plan that specifies the date services are expected to end, and (c) be structured in a way that requires a substantial commitment by the student to his/her rehabilitation. ("Substantial commitment" means a commitment of time and effort that would normally prevent a person from being employed 30 or more hours per week in a position expected to last at least three months.)
  - (2) The dependent student for whom I borrowed the Direct PLUS Loan must be either receiving, or scheduled to receive, these rehabilitation services.

### **Authorized Certifying Officials**

- Authorized Graduate Fellowship Program Official (PLUS Borrower with Dependent Student Graduate Fellowship Deferment)
- Internship/Residency Program Official (For all Internships and Residencies)
- State Licensing Official (For all Internships required to begin professional practice or service)
- Rehabilitation Training Program Official (PLUS Borrower with Dependent Student Rehabilitation Training Program Deferment)
- Chief School Administrator (Targeted Teacher Deferment)\*
- Authorized School Official (PLÜS Borrower with Dependent Student At Least Half-Time Deferment)

\*Additional certification may be required for Targeted Teacher deferments if the Chief State School Officer has not provided an annual list of approved shortage areas to School Administrators.

# Important Notices

# **Privacy Act Notice**

The Privacy Act of 1974 (5 U.S.C.552a) requires that the following notice be provided to you. The authority for collecting the information requested on this form is §451 et seq. of the Higher Education Act of 1965, as amended. Your disclosure of this information is voluntary. However, if you do not provide this information, you cannot be considered for a deferment. The information on this form will be used to determine your eligibility for a deferment of repayment of your Direct Loan Program loan(s). The information you provide may be disclosed to federal and state agencies, private parties such as relatives, present and former employers and creditors, and contractors of the Department of Education for purposes of administration of the student financial assistance program, for enforcement purposes, for litigation where such disclosure is compatible with the purposes for which the records were collected, for use by federal, state, local, or foreign agencies in connection with employment matters or the issuance of a license, grant, or other benefit, for use in any employee grievance or discipline proceeding in which the Federal Government is a party, for use in connection with audits or other investigations, for research purposes, for purposes of determining whether particular records are required to be disclosed under the Freedom of Information Act, and to a Member of Congress in response to an inquiry from the congressional office made at your written request.

Return this form and any required documentation to the Direct Loan Servicing Center. If you need to confirm the Direct Loan Servicing Center's address or require assistance with completing this form, call 1 (888) 447-4460.

# **Paperwork Reduction Notice**

The time required to complete this information collection is estimated to average 0.2 hours (12 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have any comments or concerns regarding the status of *your individual submission* of this form, write directly to the Direct Loan Servicing Center. If you need to confirm the Direct Loan Servicing Center's address, call 1 (888) 447-4460.